

## RCRAINFO CM&amp;E EVALUATION – VIOLATION FORM

<b>*EPA ID Number</b>		PAR00052816					
<b>Handler Name</b>		Kungalecki Recycling					
<b>Street</b>		3150 ORTHODOX STREET					
<b>City</b>	Phila	<b>State</b>	PA	<b>Zip Code</b>	19137		
<b>*EVALUATION</b>		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete		You must provide an Evaluation Identifier (also known as the Sequence Number).			
<b>*Evaluation Identifier</b>	<b>*Type</b>	<b>*Evaluation Start Date (mm/dd/yyyy)</b>	<b>*Agency</b>	<b>Responsible Person</b>	<b>Suborganization</b>		
	CEI	8/29/11	E	AMA	SLC70		
<b>Day Zero (mm/dd/yyyy):</b> You need to specify Day Zero for all evaluation types except CDI, CSE, FUI, SNN, and SNN, otherwise it defaults to Evaluation Start Date. For CDI, CSE, FUI, and SNN evaluations, you must select a previous CEI Start Date for the Day Zero. SNN evaluation type does not require a Day Zero.			<b>Reclassified SV Date:</b> Only applicable for SNN evaluation type as appropriate.				
<b>Notes:</b> No violations							
<b>Evaluation Indicator Field (Check all that apply)</b> <input type="checkbox"/> Citizen Complaint <input type="checkbox"/> Multimedia Inspection <input type="checkbox"/> Sampling <input type="checkbox"/> Not Subtitle C							
<b>Focused Coverage Areas (Use Only for Evaluation Type FCI)</b> <i>Regulation-Specific FCI</i> BIF <input type="checkbox"/> CCI <input type="checkbox"/> CFI <input type="checkbox"/> INC <input type="checkbox"/> LDR <input type="checkbox"/> PTB <input type="checkbox"/> PTX <input type="checkbox"/> THI <input type="checkbox"/> UIC <input type="checkbox"/> UOI <input type="checkbox"/> UWR <input type="checkbox"/> OTHER (specify): _____ <i>Routine/Standardized FCI</i> CAR <input type="checkbox"/> CPC <input type="checkbox"/> DOS <input type="checkbox"/> EMR <input type="checkbox"/> IEI <input type="checkbox"/> ISI <input type="checkbox"/> RTI <input type="checkbox"/>							
<b>Does this Evaluation Add/Delete/Update a Violation?</b>		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		If Yes, fill in the Violations Section(s) on page 2 of this form.			
<b>Does this Evaluation have Undetermined Violations?</b>		YES <input type="checkbox"/> NO <input type="checkbox"/>					
<b>Does this Evaluation link to a Commitment?</b>		YES <input type="checkbox"/> NO <input type="checkbox"/>		If Yes, please use the RCRAinfo 3007 Information Requests and Commitments Form.			
<b>Does this Evaluation link to a 3007 Request?</b>		YES <input type="checkbox"/> NO <input type="checkbox"/>		If Yes, please use the RCRAinfo 3007 Information Requests and Commitments Form.			
<b>Was this Evaluation completed at a Federal Facility? (RCRA Section 6002)</b>		YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, the Federal Facility Section (on reverse side of this form) must be completed. Only applicable to EPA Owned Inspections (Responsible Agency = E) at Federal Facilities					
<b>OUTSTANDING VIOLATIONS COVERED BY ABOVE EVALUATION?</b>		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		If Yes, fill in Information below.			
<b>Seq. No.</b>	<b>Agency</b>	<b>Type</b>	<b>Date Determined (mm/dd/yyyy)</b>	<b>Seq. No.</b>	<b>Agency</b>	<b>Type</b>	<b>Date Determined (mm/dd/yyyy)</b>

\*Required Fields

FY 2004 EPA MANUAL INSPECTION CONCLUSION DATA SHEET (ICDS) FORM  
Instructions and Definitions for Completing the Information Follow

1. Region: 3 Facility Name/Location Kuusakoski Recycling, Philadelphia, PA
2. General Facility Permit ID number: PAR00052816
3. SIC (4-digit) ☐ ☐ ☐ ☐ or NAICS Code (5-digit): 5 6 2 9 2
4. Date of Inspection: 8/24/11 (mm/dd/yyyy)
5. Media Type: CAA-Stationary ☐ CWA-NPDES ☐ GLP ☐ Lead Paint ☐ CAA 112r ☐  
CAA-Mobile Sources ☐ RCRA ☒ UST ☐ TSCA core, PCBs, asbestos ☐
6. Deficiencies: Did you observe deficiencies during inspection? ☐ Yes ☒ No [N/A is not allowed]  
a. If YES, go to #7  
b. If NO, go to #9
7. If YES: Did you communicate the deficiencies to the facility during the inspection? ☐ Yes ☒ No
8. Actions Taken: Did you observe or see the facility take any actions during the inspection to address the deficiencies communicated? ☐ Yes ☒ No [N/A is not allowed]  
a. If NO, go to #9  
b. If YES, check the action(s) taken, or describe any other actions taken. (Check all that apply)

**Action taken**

- ☐ Verified compliance with previously issued enforcement action -part or all conditions
- ☐ Corrected record keeping deficiencies
- ☐ Corrected monitoring deficiencies
- ☐ Completed a notification or a report
- ☐ Requested a permit application
- ☐ Implemented new or improved management practices or procedures
- ☐ Improved pollutant identification (e.g., labeling, manifesting, storage, etc.)
- ☐ Reduced pollution (e.g., use reduction, industrial process change, emissions or discharge change, etc.). Specify the pollutant(s) reduced only if this action is checked.

Water: Ammonia ☐ BOD ☐ COD ☐ TSS ☐ O/G ☐ TC ☐ DO ☐ Metals ☐ CN ☐

Air: NOx ☐ SO2 ☐ PM ☐ VOC ☐ Metals ☐ HAPs ☐ CO ☐

List other actions observed or other pollutants reduced: \_\_\_\_\_

9. Assistance: Did you provide general compliance assistance based on national policy? Yes ☐ No ☒

Did you provide site-specific compliance assistance based on national policy?  
☐ Yes ☐ No

Note: EPA inspectors are not required to provide compliance assistance.

Optional Information: Describe actions taken or assistance provided to assist the facility.

NOTE

TO EPA INSPECTORS:

The main purpose of EPA inspections is to determine compliance with environmental regulations and enforcement agreements. Secondary purposes include providing a field presence to create a credible deterrent and providing assistance, when appropriate, to help facilities achieve compliance.

- The ICDS is used to identify observable corrections to deficiencies and compliance assistance activities. ICDS is NOT designed to capture all of the observations, findings, and other data contained in the final inspection report. Deficiencies identified as potential violations, and actions to address deficiencies noted on the ICDS must be included in the final EPA inspection report.
- ICDS information will be used to collect accomplishments of EPA's national inspection efforts, develop inspection outcomes for GPRA, and manage national compliance monitoring resources.
- The information will NOT be used to track individual EPA inspectors' performance.
- The ICDS should only be used for EPA-led inspections, not for state oversight inspections.

#### **Instructions for each question:**

1. **Region, Facility Name/Location:** Enter the Region, and facility name/location (for unpermitted facilities).
2. **Permit ID #:** If facility has permit, enter the facility permit ID # from Facility Registration System (FRS).
3. **SIC/NAICS Codes:** Identify the SIC or NAICS code at (<http://www.commerce.gov>), (<http://www.osha.gov/oshstats/sicser.html>), (<http://www.census.gov/epcd/www/naics.html>), by CD-rom (PB98-502024- NTIS (800-553-6847), or OC Inspector Website (<http://intranet.epa.gov/oeca/inspector>)
4. **Date of Inspection:** Enter the beginning date of the inspection (e.g., 04/10/2004)
5. **Media Type:** Check the environmental media program inspection being conducted.
6. **Deficiencies:** Check YES or NO. EPA inspectors should follow the regional policy on when and how to inform facilities of deficiencies. Deficiencies are defined as potential violations. Deficiencies are NOT compliance determinations (further review is needed to determine violations). A list of potential deficiencies is on the ICIS compliance monitoring screen. (<https://caribou.rtpnc.epa.gov/ICIS/>)
7. **Communication:** Check YES or NO. N/A is not allowed.
8. **Actions Taken:** Check YES or NO. If Yes, check only action(s) actually observed/seen, or write in a short description of the action in the "Other" section. These are *not* compliance determinations. Check the box to specify the pollutant: *Ammonia* – NH<sub>3</sub>-N, ammonia nitrogen, ammonia as N, *BOD*-Biochemical Oxygen Demand, *COD*- Chemical Oxygen Demand, *TC*-Total Coliform, *TSS*- Total Suspended Solids, *SS*, Settleable solids, *O/G*- Oil and Grease, *DO*- Dissolved Oxygen, *NO<sub>x</sub>*- Nitrogen Oxides, *SO<sub>2</sub>*- Sulphur Dioxide, *PM*- Particulate Matter, *VOC*- Volatile Organic Compound, *CN*- Cyanide, *HAPs* – Hazardous Air Pollutants, *CO*- Carbon Monoxide, *Metals*- Hexavalent Chromium, Lead, Mercury, etc. Write in other pollutants if not listed. The Case Conclusion Data Sheet Training Booklet [November, 2000] provides additional information on actions taken. The Training Booklet can be obtained by calling the Office of Compliance(202-564-6004).
9. **Compliance Assistance:** Inspectors are not required to provide compliance assistance during inspections. Check YES or NO to the two questions. General compliance assistance involves distributing prepared information on regulatory compliance, P2 or other written materials/websites. Refer to National Policy: Role of the EPA Inspector in Providing Compliance Assistance During Inspections, June, 2003 for more information for examples of site-specific assistance. The policy is available on the EPA website ([www.epa.gov](http://www.epa.gov)), the Inspector Website (<http://intranet.epa.gov/oeca/inspector>), or calling (202-564-2300).

#### **Data Collection Process:**

- ➔ Inspectors must complete the ICDS *immediately* after the inspection is conducted.
- ➔ Inspector should forward completed forms to first-line supervisor or a designated alternate within five (5) days after returning from either a single inspection, or a series of inspections.
- ➔ The first-line supervisor or designated alternate must review the ICDS for completeness and accuracy.
- ➔ First line supervisors or designated alternates will compile the ICDS information by media program in order to report ICDS results using a consolidated manual reporting form.
- ➔ The consolidated manual reporting form must be sent to HQ for mid-year (~April, 2004) & end-of-year reporting (~October, 2004).